

06-23-04

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JUN 22 2004

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32658 7590 03/29/2004

HOGAN & HARTSON LLP
 ONE TABOR CENTER, SUITE 1500
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Julie Lange

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/510,938	02/22/2000	Paul S Murray	1004-4085	2969

TITLE OF INVENTION: AVAILABILITY, RELIABILITY OR MAINTAINABILITY INDEX INCLUDING OUTAGE CHARACTERIZATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	06/29/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
DESTA, ELIAS	2857	702-182000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Kent A. Lembke2 William J. Kubida3 Hogan & Hartson LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Sun Microsystems, Inc.

Palo Alto, California

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

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 Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies _____ The Director is hereby authorized to charge the required fees or credit any overpayment, to Deposit Account Number 50-1123 (enclose an extra copy of this form).

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22 June 2004
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